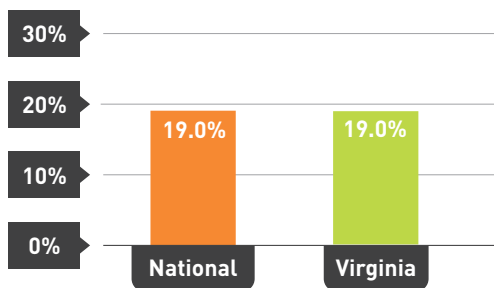


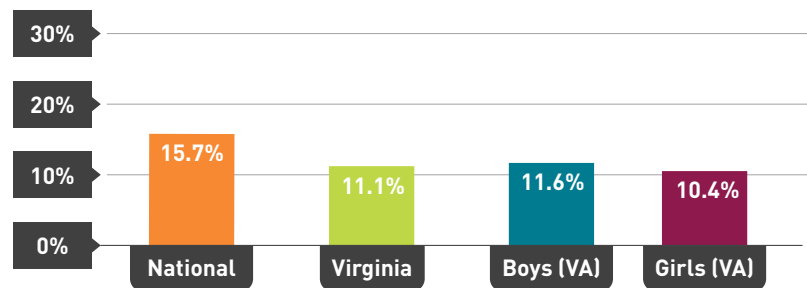
VIRGINIA + TOBACCO

CIGARETTE USE

% of Adults Who Currently Smoke¹



% of High School Students Who Currently Smoke²



OTHER TOBACCO PRODUCT USE

- The prevalence of smokeless tobacco use among adults in Virginia was 4.0% in 2013. 7.1% of adult current cigarette smokers in Virginia were also current smokeless tobacco users in 2013.³
- In 2013, 8.3% of high school students in Virginia used chewing tobacco, snuff, or dip on at least one day in the past 30 days. Nationally, 8.8% of high school students used smokeless tobacco on at least one day in the past 30 days.²
- In 2013, 11.3% of high school students in Virginia smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days. Nationally, 12.6% of high school students smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days.²

ECONOMICS OF TOBACCO USE AND TOBACCO CONTROL

- In FY2015, Virginia allocated \$8.5 million in state funds to tobacco prevention, which is 9.3% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.⁴
- The health care costs in Virginia, directly caused by smoking, amount to \$3.11 billion annually.⁴
- State and federal Medicaid costs in Virginia total \$485.6 million annually for smoking-caused health care.⁵
- Virginia loses \$3.06 billion in productivity each year due to smoking.⁵

- Virginia received an estimated \$301 million in tobacco settlement payments and taxes in FY2015.⁴

STATE TOBACCO LAWS^{6,7}

EXCISE TAX

- The state tax increased to \$0.30 per pack of cigarettes in July 2005. Moist snuff is taxed \$0.18 per ounce. Loose-leaf tobacco is taxed \$0.21 for a single unit, \$0.40 for a half-pound unit, and \$0.70 for a pound unit or \$0.21 for all other units, pouches or packages plus an additional \$0.21 for each 4 ounce increment over one pound. All other tobacco products are taxed 10% of the manufacturers' sales price.

CLEAN INDOOR AIR ORDINANCES

- Smoking is prohibited in public schools and childcare facilities (excludes home-based child care providers).
- Smoking restrictions are required in all government workplaces, health facilities, restaurants, bars, retail stores, and recreational facilities. There are no restrictions on smoking in private workplaces or casinos.

YOUTH ACCESS LAWS

- The minimum age requirement for the purchase of tobacco products is 18, and penalties exist for both minors and merchants who violate this law.
- Establishments are required to post signs stating that sales to minors are prohibited.
- The sale to minors of bidis is prohibited.
- The sale to minors of alternative nicotine products, including electronic cigarettes, is prohibited.

CESSATION STATISTICS AND BENEFITS

- The CDC estimates that 53.4% of adult smokers in Virginia tried to quit smoking in 2013.⁸
- Virginia's Medicaid program covers the Nicotine Replacement Therapy (NRT) Patch. Coverage for NRT Gum, NRT Nasal Spray, NRT Inhaler, NRT lozenge, Varenicline (Chantix), Bupropion (Zyban), individual, group and phone counseling varies by health plan.^{7*}
- The limitations of coverage for the state's Medicaid program vary by health plan.^{7**}
- Virginia's state quitline invests \$0.38 per smoker; the national average investment per smoker is \$3.65.⁷
- Virginia does not have a private insurance mandate provision for cessation.⁷

REFERENCES

¹ CDC, Behavioral Risk Factor Surveillance System, 2013

² CDC, Youth Risk Behavior Surveillance System, 2013

³ CDC, State-Specific Prevalence of Cigarette Smoking and Smokeless Tobacco Use Among Adults—MMWR, United States, 2011-2013

⁴ Campaign for Tobacco-Free Kids, Broken Promises to Our Children: a State-by-State Look at the 1998 State Tobacco Settlement 16 Years Later FY2015, 2014

⁵ Campaign for Tobacco-Free Kids, State Tobacco-Related Costs and Revenues, 2014

⁶ American Lung Association, SLATI State Reports, 2015

⁷ American Lung Association, State of Tobacco Control, 2014

⁸ CDC, Behavioral Risk Factor Surveillance System, State Tobacco Activities Tracking and Evaluation System, 2013

* The seven recommended cessation medications are NRT Gum, NRT Patch, NRT Nasal Spray, NRT Inhaler, NRT Lozenge, Varenicline (Chantix), and Bupropion (Zyban).

Fiore MC, Jaen CR, Baker TB, Bailey WC, Benowitz NL, Curry SJ, et al. Treating Tobacco Use and Dependence: 2008 Update. Clinical Practice Guideline. Rockville, MD: US Department of Health and Human Services. Public Health Service: May 2008.

** Barriers could include: Duration limits, annual limits on quit attempts, prior authorization requirements, co-payments, requiring using one cessation treatment before using another and/or requiring counseling to get medications.